

## **Residential Supported Living Services Conditions of Participation**

*Residential supported-living services may be provided for participants who need assistance with the activities of daily living, but do not need the degree of care provided in a nursing facility. These services are provided in residential settings staffed 24 hours a day by on-site personnel who must be available to meet both scheduled and unpredictable participant needs. The residential settings must provide a home-like environment where supervision, safety, and security are available for participants, and social and recreational activities are provided in addition to the services necessary to prevent institutionalization.*

*The provider who chooses to offer residential supported-living services must be certified as a provider of residential supported-living services under 7 AAC 130.214 (b)(3), meet with the requirements of 7 AAC 130.255, and operate in compliance with the following standards.*

### **I. Program administration**

#### **A. Personnel.**

##### **1. Residential supported living services program administrator.**

- a. The provider must designate a residential supported-living program administrator who is responsible for day-to-day management of the program and who may serve in dual capacity as the assisted living home administrator.
- b. The provider may use a term other than program administrator for this position, e.g., program director, program manager, or program supervisor.
- c. If the administrator's position in the provider's organizational structure is such that the administrator does not manage the daily operations of the home, the provider must designate an individual, who meets the qualifications for the position of program administrator, to provide onsite management for a minimum of 20 hours a week, and whose responsibilities include
  - i. orientation, training, and supervision of direct care workers;
  - ii. implementation of policies and procedures;
  - iii. intake processing and evaluation of new admissions;
  - iv. participation in the development of service plans in collaboration with care coordinators and other providers of services;
  - v. ongoing review of the delivery of services, including
    - A) monitoring the amount, duration, and scope of services to assure delivery as outlined in the service plan;
    - B) assessing whether the services assist the participants to attain the goals outlined in service plans; and
    - C) evaluating the quality of care rendered by direct care workers;
  - vi. development and implementation of corrective action plans for identified problems or deficiencies; and
  - vii. submission of required reports to Senior and Disabilities Services, including critical incident reports and service evaluation reports.

##### **2. Residential supported living services direct care workers.**

The provider must employ a number of direct care workers sufficient to allow time for

- a. a daily routine of unhurried assistance with bathing, dressing, and eating at times that meets the needs of each participant;
- b. assistance with mobility as needed;
- c. toileting and incontinence care to ensure the comfort; and
- d. repositioning at a minimum of every two hours for participants who require such assistance.

**B. Training.**

In addition to the training required under 7 AAC 75.240, the provider must train direct care regarding

1. nutrition, hydration, and special diet needs of the participant population;
2. risk factors and monitoring for skin integrity and urinary tract infections; and
3. fall prevention.

**II. Program operations****A. Evaluation.**

The provider must collaborate with the participant's care coordinator to determine whether, given the participant's diagnosis and needs, its direct care workers have the capacity to provide residential supported living services for that participant.

**B. Participant safety.**

The provider must

1. maintain reasonable awareness of the schedule and location of participants who do not require supervision or an escort when absent from the assisted living home for the purposes of accessing services or engaging in activities in the community; and
2. contact the participant's representative or care coordinator when the provider is concerned about a participant's health, safety, or welfare while in the community.

**C. Participant activities.**

The provider must accord to participants

1. a full range of activities ordinarily available in a home, including the opportunity to socialize, to exercise, to participate in household activities, and to be outdoors; and
2. opportunities for contact with family and friends, including visits in the home.